								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECOI									1/1/1/59/1991					
													20/	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	EN		OR	OTHER SMALL I		
TOTAL CLAIMS			29					RATE		FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 375.00		375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			ጋጻ minus 20=		• 9			X\$ 9= 81		81	OR	X\$18=	<i>'</i>	
INDEPENDENT-CLAIMS			3minus-3-=-		*		-	X42=		OR	_X84≡			
MU	TIPLE DEPEN	DENT CLAIM PI	RESENT					+140=			OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2									L	456	OR	TOTAL		
O/ / X CLAIMS AS AMENDED - PART II												OTHER		
4	600	(Column 1)		(Colui		(Column 3)		SMAL	L E	NTITY	OR(SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO	BER OUSLY	PRESENT EXTRA	1	RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DME	Total	* 29	Minus	** 0	19			X\$*8	<u> </u>	, , , , ,	OR	X\$18=	/	
MEN	Independent	. 3	Minus	*** (3	-		X42=	X		OR	X8 x =		
	FIRST PRESE	TCLAIM]	+140			OR	+280=					
									- IAL		OR	TOTAL	\rightarrow	
(Column 1) (Column 2) (Column 3)									EE		Jon	ADDIT. FEE	L	
	CLAIMS		HIG		HEST		1			ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER OUSLY FOR	PRESENT EXTRA		RATI	E	TIONAL		RATE	TIONAL FEE	
Į Į	Total	*	Minus	**		=]	X\$ 9	=		OR	X\$18=		
	Independent	*	Minus	***		=	×		<u> </u>		OR	X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR			
+140= TOTAL										OR	TOTAL			
ADDIT. FEE											Jou	ADDIT. FEE		
		(Column 1) CLAIMS			IMN 2)	(Column 3)			· -==:	1			
AMENDMENT C		REMAINING AFTER AMENDMENT		NUT PREV	MBER NOUSLY D FOR	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NO.	Total	•	Minus	**		Ξ		X\$ 9	=		OR	X\$18=		
ME	Ind pendent	*	Minus	***]=		X42	=		OR	You		
L	FIRST PRESE	NTATION OF M	IULTIPLE DE	PENDEN	IT CLAIN		J				1			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	TOTAL	 	
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE *If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											JOR	ADDIT. FEE		
	The "Highest Nur	mber Previously P	aid For" (Total	or Indepen	dent) is th	e highest num	ber fo	ound in th	e ap	propriate be	ox In c	olumn 1.		

FORM PTO-875 (Rev. 12/02)